

DECLARATION AND POWERS OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DUAL USE OF AN INTEGRATED CIRCUIT PIN AND THE SWITCHING OF SIGNALS AT SAID PIN the specification of which was filed on October 9, 2001 as Application Serial No. 09/973,264 and was amended on , or, if not identified here by filing date and serial number, is attached hereto. I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 CFR 1.56. I hereby claim foreign priority benefits under 35 USC 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any toreign application for patent or inventor's certificate by me or my representatives or assigns for this invention having a iling date before that of the application on which priority is claimed. Application No. in priority claimed [] Yes [] No on priority claimed [] Yes [] No I hereby claim the benefit under 35 USC 120 of any United States application(s) listed below and, insofar as the subject matter of each of the acknowledge the duty to disclose material information as defined in 37 CFR 1.56(a) which occurred between the filling date of the prior application I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. I hereby appoint, individually and collectively, the following as my/our attorney or agent with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith: Joseph S. Tripoli Registration No. 26,040 and Registration No. 36,269 Robert D. Shedd and Frederick A. Wein Registration No. and Registration No. PLEASE ADDRESS ALL COMMUNICATIONS TO: JOSEPH S. TRIPOLI PATENT OPERATIONS THOMSON MULTIMEDIA LICENSING INC. P. O. BOX 5312 PRINCETON, NEW JERSEY 08543-5312 Sole or Joint Gene Karl Sendelweck len deline Inventor (1) (Type or Print) Citizenship USA 11/30/2001 Date Post Office Address 5415 E. 72nd Street, Indianapolis, Indiana 4625) Indianapolis, Marion County, Indiana Residence Sole or Joint Inventor (2) (Type or Print) (Signature in Full. No initials.) Citizenship Date ___ Post Office Address Residence Sole or Joint Inventor (3) (Signature in Full. No initials.) (Type or Print) Citizenship Post Office Address Residence